

10/573590

IAP20 Rec'd PCT/PTO 27 MAR 2006

APPLICATION DATA SHEET

APPLICATION INFORMATION

Application Type:: REGULAR
Subject Matter:: UTILITY
CD-ROM or CD-R?:: NONE
Title:: THERAPEUTIC AGENT FOR AGEING
MACULAR DEGENERATION
Attorney Docket Number:: 287635US0PCT
Total Drawing Sheets:: 1

INVENTOR INFORMATION

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Japan
Status:: FULL CAPACITY
Given Name:: Satoshi
Family Name:: HIBINO
City of Residence:: Fukuyama-shi
State or Province of Residence:: Hiroshima
Country of Residence:: Japan
Street of Mailing Address:: c/o Fukuyama University Faculty of
Pharmacy & Pharmaceutical Sciences, 1,
Gakuenmachi
City of Mailing Address:: Fukuyama-shi
State or Province of Mailing Address:: Hiroshima
Country of Mailing Address:: Japan
Postal or Zip Code of Mailing Address:: 729-0292

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Japan
Status:: FULL CAPACITY
Given Name:: Masashi
Family Name:: YAMADA
City of Residence:: Tokyo
Country of Residence:: Japan
Street of Mailing Address:: c/o Meiji Dairies Corporation, 2-10, Shin-
Suna 1-chome, Koto-ku
City of Mailing Address:: Tokyo
Country of Mailing Address:: Japan
Postal or Zip Code of Mailing Address:: 136-8908

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Japan
Status:: FULL CAPACITY
Given Name:: Taketo
Family Name:: YAMAJI
City of Residence:: Odawara-shi
State or Province of Residence:: Kanagawa
Country of Residence:: Japan
Street of Mailing Address:: c/o Meiji Dairies Corporation, 540, Naruda
City of Mailing Address:: Odawara-shi
State or Province of Mailing Address:: Kanagawa
Country of Mailing Address:: Japan
Postal or Zip Code of Mailing Address:: 250-0862

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Japan
Status:: FULL CAPACITY
Given Name:: Hiroto
Family Name:: SUZUKI
City of Residence:: Tokyo
Country of Residence:: Japan
Street of Mailing Address:: c/o Meiji Dairies Corporation, 2-10, Shin-Suna 1-chome, Koto-ku
City of Mailing Address:: Tokyo
Country of Mailing Address:: Japan
Postal or Zip Code of Mailing Address:: 136-8908

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 22850

REPRESENTATIVE INFORMATION

Representative Customer Number:: 22850

DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/JP04/03969	03/23/04

FOREIGN PRIORITY INFORMATION

Application Number:	Country::	Filing Date::	Priority Claimed::
2003-337426	Japan	09/29/03	YES

ASSIGNMENT INFORMATION

Assignee Name:: MEIJI DAIRIES CORPORATION
Street of Mailing Address:: 2-10, Shin-Suna 1-chome, Koto-ku
City of Mailing Address:: Tokyo
Country of Mailing Address:: Japan
Postal or Zip Code of Mailing Address:: 136-8908